# SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

DATE: 01/03/11

DEPT. 85

HONORABLE ROBERT H. O'BRIEN

A. FAJARDO JUDGE

DEPUTY CLERK

HONORABLE

JUDGE PRO TEM

ELECTRONIC RECORDING MONITOR

J. DE LUNA, C.A.

Deputy Sheriff

NONE

Plaintiff

Reporter

1:53 pm BS121397

Counsel

NO APPEARANCES

VS

Defendant

CALIFORNIA DEPARTMENT OF MANAGE Counsel

HEALTH CARE ET AL

CONSUMER WATCHDOG ET AL

### NATURE OF PROCEEDINGS:

RULING ON HEARING ON PETITION FOR WRIT OF MANDATE

The Court having taken the above stated matter under submission on 12/13/10, now rules as more fully reflected in the "Decision Re: Petition for Writ of Mandate", consisting of eight(8) pages, which is signed and filed this date.

The Writ will be denied as to paragraph 1a of the prayer. The Writ will be granted as to paragraph 1b

Paragraph 1c of the prayer is moot as noted above.

Paragraph 2a and 2b are subsumed in the ruling as to

As to paragraph 3, the Court denies declaring the contents of 3a. As to paragraph 3b, it is subsumed by the ruling as to paragraph 1.

Paragraph 3c is subsumed by the ruling in paragraph 1.

Paragraph 4 of the prayer will be left to a postjudgment motion.

Counsel for the Petitioner is to prepare and serve a proposed Judgment and Writ on opposing Counsel to approve as to form.

> Page 1 of 3 DEPT. 85

MINUTES ENTERED 01/03/11 COUNTY CLERK

## SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

DATE 01/02/11				
DATE: 01/03/11				<b>DEPT.</b> 85
HONORABLE 1	ROBERT H. O'BRIEN JUDGE	A.	FAJARDO	DEPUTY CLERK
HONORABLE	JUDGE PRO TEM			ELECTRONIC RECORDING MONITO
J. DE LUNA, C.A. Deputy Sheriff		NOI	NE	Reporter
1:53 pm	BS121397	Plain	riff	
	CONSUMER WATCHDOG ET AL	Counsel  Defendant	sel	APPEARANCES
	VS CALIFORNIA DEPARTMENT OF MANAGE			

#### NATURE OF PROCEEDINGS:

HEALTH CARE ET AL

#### CLERK'S CERTIFICATE OF MAILING/ NOTICE OF ENTRY OF ORDER

I, the below named Executive Officer/Clerk of the above-entitled court, do hereby certify that I am not a party to the cause herein, and that this date I served Notice of Entry of the above minute order of 1/3/11 upon each party or counsel named below by depositing in the United States mail at the courthouse in Los Angeles, California, one copy of the original entered herein in a separate sealed envelope for each, addressed as shown below with the postage thereon fully prepaid.

Date: 1/3/11

John A. Clarke, Executive Officer/Clerk

By: A. Fajardo

Page 2 of 3 DEPT. 85

MINUTES ENTERED 01/03/11 COUNTY CLERK

## SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

DATE: 01/03/11 DEPT. 85

HONORABLE ROBERT H. O'BRIEN JUDGE A. FAJARDO DEPUTY CLERK

HONORABLE JUDGE PRO TEM ELECTRONIC RECORDING MONITOR

J. DE LUNA, C.A. Deputy Sheriff NONE Reporter

1:53 pm BS121397 Plaintiff
Counsel

CONSUMER WATCHDOG ET AL NO APPEARANCES

VS Counsel
CALIFORNIA DEPARTMENT OF MANNOGRA

CALIFORNIA DEPARTMENT OF MANAGE HEALTH CARE ET AL

#### NATURE OF PROCEEDINGS:

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PAMELA PRESSLEY, ESQ. JERRY FLANAGAN Consumer Watchdog 1750 Ocean Park Blvd., Ste 200 Santa Monica, CA 90405-4938

MICHAEL MCCLELLAND
DREW BRERETON
Department of Managed Health Care
980 9th St., Ste 500
Sacramento, CA 95814

Page 3 of 3 DEPT. 85

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Superior Court of California County of Los Angeles

DEC 30 2010

John A. Clarke, Executive Officer/Clerk
By ANNETTE FAJARDO, Deputy

## SUPERIOR COURT OF THE STATE OF CALIFORNIA FOR THE COUNTY OF LOS ANGELES

CONSUMER WATCHDOG, et al.,

Petitioners.

Case No. BS121397

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VS.

DECISION RE: PETITION FOR WRIT OF MANDATE

CALIFORNIA DEPARTMENT OF MANAGED HEALTH CARE, et al.,

Respondents\Defendants.

The three causes of action in the First Amended Petition and Complaint are focused on a CCP § 1085 Petition for Writ of Mandate (first cause of action):

- 1) To compel Respondent to order health plans that deny ABA treatment to autistic enrollees on the ground there is no coverage, to provide coverage to licensed ABA providers or ABA providers who are certified for private professional organizations, or ABA providers who are supervised by a licensed or certified ABA provider;
- 2) To compel Respondent to cease implementing the March 9, 2009 memorandum:
- 3) To compel Respondent to produce all non-privileged, non-exempt public records listed in the April 10, 2010 request.

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The complaint also seeks an injunction (second cause of action)<sup>1</sup> and declaratory relief (third cause of action) relating to the same subjects set out above. The injunction relief and declaratory cause of action turn on the mandate decision.

#### Public Records Act

The court deems this request as negligible and tangential to the main purpose of the writ. Petitioner's counsel indicated that petitioner does not intend to pursue this claim with respect to the substantive part of the present petition — that is, Respondents' failure to produce everything petitioner asserts is producible does not, and will not, affect the decision on the mandamus, impact its position on the substantive merits. As the court observed during the hearing, it would be unproductive to rule on the writ portion, and if petitioner is unsuccessful then have petitioner come back to court after receiving the documents requested and want to have the writ process heard again. Counsel assures the court that the substantive part of the writ as it exists now does not and will not depend on the missing documents if there are any.

Thus, the court deems this part of the petition moot to being revived in some other setting or case. Moreover, petitioner apparently was denied access to the documents before the December 18, 2010 trial on the petition and did not bring a motion to compel before trial.

By this order the court does not intend to rule on Respondent's objection to the Public Records Act claim.

### **Evidence and Other Objections**

### Respondent's objections:

- Use of privileged material (Jacobson Declaration) sustained. The last page of Exhibit B to Jacobson declaration may be removed. Counsel shall coordinate removal with the court's judicial assistant.
  - 75 objections filed November 22, 2010.

Injunction relief is a remedy and not a cause of action.

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- Overruled. Some of the declaration's evidence encroaches into lega	
conclusions, which are not admissible under any circumstances, or other conclusory	
statements that might not be received in a live witness trial. Also, other questionable	
evidence sometimes has crept into some of the declarant's statements. However, the court	
can discern the important and clearly admissible opinions, as well as the direct and indirect	
evidence, in evaluating the submitted declarations. The court automatically ignores any	
egal opinions or conclusions that are offered.	
Objection to Entry of	

- Objection to Exhibits D and E to Kahn declaration (objection filed December 13, 2010).
  - Sustained. Legal conclusion.

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- Objection to Jacobson declaration Exhibits (objection filed December 13, 2010).
  - Overruled.
- Objection to Exhibits attached to Reply.
  - Overruled. (Respondent could have asked for further briefing but didn't.)
- Objection to post-hearing letter.
- Overruled. The letter was simply responding to respondent's oral argument that supplemented respondent's written brief.
  - Objections made during Donahue deposition.
    - Overruled.

## Petitioner's objections:

- Evidence objections to several declarations (filed December 6, 2010).
  - Overruled.
- Objection to Supplemental Declaration of Donahue (filed December 9, 2010).
  - Overruled.

## Requests for Judicial Notice:

- Petitioner's Requests (filed November 2, 2010 and December 6, 2010) - granted.

- Respondent's Requests (filed November 22, 2010).

- Denied as to Exhibits II, and JJ.
- Grant rest.

#### Impact of Demurrer

Petitioner asserts that the court has already rejected current arguments by virtue of the ruling on demurrer. (Reply p. 1, lines 18-21; opening brief, p. 11, lines 24-28, and p. 19, lines 5-7.)

A demurrer admits the truth of all material facts properly pled but not contentions, deductions, or conclusions of fact or law. (Aubrey v. Tri-City Dist., 2 Cal.4th 962, 966-967.)

If petitioner's position is correct that the court has already rejected Respondent's arguments, there would be no need for a mandate hearing at all.

A ruling on a demurrer is an attack on the pleadings and is not binding on subsequent procedures such as summary judgment or trial. (See e.g. <u>Aerojet General Corp. v. Commercial Union Ins. Co.</u>, 155 Cal.App.4th 132, 139 fn. 6.)

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Business and Professions Code section 2052 is limited to the practice of medicine and the licensing of physicians, osteopaths, podiatrists, and perhaps mid-wives.

Other healing arts (psychologists, nurses, occupational therapists, etc.) have separate regulatory and licensing provisions. (See e.g. West's annotated Calif. Codes, Business & Professions, Vol. 3A, Pt. 2, p. 2 and 2010 Revised Pocket Part, p. 1 listing the myriad of specialities including Health Care Providers.) Section 2052 does not prohibit non-licensed ABA specialists from practicing.

### Ministerial Duty

Health care service plans administered by the Respondent are required to be licensed by the state of California (Health & Saf. Code, § 1349).

Respondent has the duty to "ensure that health care service plans provide enrollees with access to quality health care services and protect and promote the interests of enrollees" (Health & Saf. Code, § 1341(a), emphasis added).

Mandamus is not available to compel an act that Respondent has no legal duty to perform. (Shamsion v. Dept. of Conservation, 136 Cal.App.4th 621, 639.) Also, mandamus requires not only a ministerial duty, it requires that the petitioner have a clear, present, and beneficial right to the performance of the duty. (See Cooper v. Estevo Mun. Imp. Dist., 70 Cal.2d 645, 650.) Respondents do not challenge the petition on the "beneficial right" of petitioners. In any event, when the public interest is extant, as here, there is an exception to the beneficial right condition.

A ministerial act or duty is one in which someone (including a public officer or entity) is required to perform in a prescribed manner and without regard to its judgment or opinion; contrasted to where the public officer or entity has the power to act according to the dictates of its own discretion judgment, and reasonable application of law.

In this case there is no clear direction compelling Respondent to perform in the manner requested by the petitioner. Indeed, the Department's primary statutory duty is to insure that plans provide quality health care services in order to <u>protect</u> the interests of the enrollees. The Department has determined, given the extensive licensing model in California for health care services, that requiring licensing for the type of intense behavior analysis provided to autistic patients is the proper standard by which to insure quality service and protection for enrollees. That doesn't mean ABA is not medically necessary in appropriate cases. It just means that the quality of that analysis cannot be measured by private entities over which the state has no control.

What's wrong with requiring licensing? Why delegate quality control to a private entity especially in dealing with health care and in particular with autistic young people? The state would lose control over quality by delegating qualification decisions to the certification process of BACB. There is no ministerial duty to do so.

Petitioner's remedy is with the Legislature and not by mandamus.

The court does not doubt that ABA is an acceptable therapy for autism, in conjunction with several other disciplines. There is no evidence that it is the only acceptable or effective therapy.

Many people, including experts, have the opinion that "whatever works" is an acceptable mode of approach to unsolved, or not readily curable, conditions like autism, cancer, etc. However, that does not translate into a legal requirement that Respondent has a "ministerial duty" to compel coverage for unlicensed specialists.

The court does, in no way, intend to demean the BACB or its members and certificate holders. ABA most certainly should continue as a possible treatment for autism — it just means that the respondent is not obliged, under its duty, to compel insurance coverage for an unlicensed provider. As noted above, the court has determined that here is no illegality to ABA practice under Bus. & Prof. Code, § 2052, the only argument presented that purports to establish that the unlicensed practice of ABA is illegal.

## "Underground" Regulation

The court does not recall any statute using the term "illegal underground regulation." If there is, counsel will advise the court and the term will be so used henceforth.

Again, petitioner relies on the Demurrer decision in asserting a closed-deal argument (p. 19, lines 5-7 of opening brief).

On March 9, 2009, the Department issued a Memorandum to insurance plans entitled "Improving Plan Performance to Address Autism Spectrum Disorders." The Department claims that the Memo is not a regulation because it sets forth "the only legally tenable interpretation" of the law.

The two-part test for determining whether such a memorandum constitutes a "regulation" subject to the Administrative Procedures Act ("APA") is well established. "First, the agency must intend its rule to apply generally . . . Second, the rule must 'implement, interpret, or make specific the law enforced or administered by [the agency], or . . . govern [the agency's] procedure." <u>Tidewater Marine Western, Inc. v. Bradshaw</u>, (1996) 14 Cal.4th 557, 571 (quoting Gov. Code, § 11342(g)).<sup>2</sup> This definition sweeps "very broadly" (<u>Id.</u> at

<sup>&</sup>lt;sup>2</sup><u>Tidewater Marine Western Ins. v. Bradshaw</u>, 14 Cal.4th 557, 571, relied on by petitioner (and referred to in the demurrer opinion) quotes from former Gov. Code, § 11342(g) defining "Regulation." Section 11342(g) has since been repealed with part of it continued as in (§ 11342.600) (defining Regulation) and (§ 11340.9(d) (exclusions from administrative Regulations).

p. 571) to ensure that all stakeholders may participate through a formal, public process in the adoption of any "regulation." (<u>Id.</u> at pp. 568-569.)

The Memo's grievance procedure is a regulation. It provides that for any appeal of a treatment denial for an autistic enrollee, "[t]he DMHC will initially make a determination whether the service being sought is a covered health care service," and the appeal will be referred to IMR only if "that determination is made in the affirmative" and the dispute involves a claim that a service is either "experimental or investigational" or "is not medically necessary to treat the patient's condition." In other words, the Memo provides that an enrollee appeal raising both coverage and medical necessity issues will first be reviewed by the Department for coverage issues.

This interpretation is not "patently compelled" by statute, however. Health and Safety Code section 1374.30(d)(3) expressly declares that "[i]f there appears to be any medical necessity issue, the grievance shall be resolved pursuant to an independent medical review." This statute can be interpreted to mean that if an appeal raises both coverage and medical necessity issues, it must be sent to IMR. On the other hand, it can be interpreted to mean the Department must refer to IMR only if an issue if medical necessity remains after the Department's determination of coverage.

Nonetheless, the Department's interpretation is not merely repetitive of the statutory language and is not the only legally tenable interpretation. As such, it is an attempt to "implement, interpret, or make specific the law" (Gov. Code, § 11342(g)), the essence of a regulation.

The fact alone that the court determines that the March 9, 2010 purports to be a "regulation" that needs to comply with the Administrative Procedures Act (Gov. Code, § 11340), does not detract from or impact respondent's discretionary decision to continue its practice of determining coverage issues on the general basis of denying the demand to compel plans to cover non-licensed ABA specialists. Moreover, petitioner's augment that the court should issue a writ commanding Respondent to also "return to its prior system of referring complaints . . . to IMR for an independent medical panel's decision . . ." to

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determine "medically necessary," is not within the scope of this Petition.

There is nothing prohibiting Respondent from deciding coverage issues before "medical necessity" issues are decided. Every "medically necessity" procedure does not a fortiori mean that the procedure is covered, i.e. if the procedure purports to be administered by a non-licensed specialist.

#### Conclusion

The writ will be denied as to paragraph 1a of the prayer. The writ will be granted as to paragraph 1b of the prayer.

Paragraph 1c of the prayer is moot as noted above.

Paragraph 2a and 2b are subsumed in the ruling as to paragraph 1.

As to paragraph 3, the court denies declaring the contents of 3a. As to paragraph 3b, it is subsumed by the ruling as to paragraph 1.

Paragraph 3c is subsumed by the ruling in paragraph 1.

Paragraph 4 of the prayer will be left to a post-judgment motion.

Counsel for Petitioner to prepare, serve and file in Department 85 a Proposed Judgment and Proposed Writ forthwith. The Court will hold these proposals for seven days before signing the Judgment.

Dated: DEC 3 0 2010

ROBERT H. O'BRIEN

Judge of the Superior Court

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